WAPA F 3000 73# (11/01) DOE Notice 142 1

U.S. DEPARTMENT OF ENERGY WESTERN AREA POWER ADMINISTRATION FOR OFFICIAL USE ONLY

CITIZENSHIP FORM

This form is in accordance with DOE Notice 142.1, Unclassified Foreign Visitsd and Assignments. The information will be treated as privacy information and one copy will be kept in a secured filing cabinet.

Citizenship: Please mark the box that applies to you and answer the questions associated with the

box you marked. Sign and date at the space provided below and return this form to the responsible Contracting Officer Representative. ☐ I am a U.S. citizen by birth in the United States. 1.) What is your mother's maiden name? ☐ I am a U.S. citizen, but I was NOT born in the U.S. 1.) What is your mother's maiden name? 2.) Provide Information about one or more of the following proofs of your citizenship. Naturalization Certificate (Where were you naturalized?) Court _____ City ____ State __ Certificate Number Month/Day/Year Issued Citizenship Certificate (Where was the certificate issued?) City _____ State___ Certificate Number Month/Day/Year Issued State Department From 240- Report of Bith Abroad of a Citizen of the United States. Date Issued: Month/Day/Year 3.) Dual Citizenship If you are (or were) a dual citizenship of the United States and another country, provide the name of that country. Country ☐ I am not a U.S. Citizen. 1.) What is your mother's maiden name? 2.) If you are an alien, provide the following information: ☐ Place you entered the United States? City ___ State ____ Alien Registration Number Country of Citizenship Printed Name:

Signature: Date:

WAPA F 3000-72# (6/03)

FOREIGN NATIONAL DATA CARD FOR UNCLASSIFIED FOREIGN VISITS AND ASSIGNMENTS TO WESTERN AREA POWER ADMINISTRATION Please print clearly

| Personal Data | SECTION A | | |
|---|-----------------------------|---------------------------------------|--|
| 1. Name of Visitor: (Last) | (First) | (Middle) | |
| , | (| (·····au.c) | |
| | | | |
| 2. Male 🗌 Female 🗌 | | | |
| 3. Country of Birth: | 6. Date of Birth: | 8. Citizenship: | |
| , | 1 1 | or orazonomp. | |
| 4. City of Birth: | | 9. Passport/Visa/Immigration Numbers: | |
| n only of Biran. | 7. Social Security Number: | 9. Fassport visa/minigration Numbers. | |
| 5. Permanent Address: | 7. Ocean oceanty Number. | 10. Country of Issue: | |
| | | 10. Country of 133de. | |
| | | 11. Expiration Date: | |
| | | The Expiration Bate. | |
| | | | |
| Employment Data | SECTION B | | |
| 12. International Agreement Code: | 13. Current Employer/Busine | ess Name: | |
| | | | |
| | | | |
| | 14. Business Address: | | |
| | | | |
| | | | |
| | | | |
| Visit Data | SECTION C | | |
| 15. Buildings/Sites to be Visited: | | | |
| | | | |
| | | | |
| | | | |
| 16. Request Date: | 17. Name and Signature of I | 17. Name and Signature of DOE Host: | |
| | | | |
| | | | |
| 18. Purpose of Visit: | | | |
| | | | |
| | | | |
| 19. Technological Area (Be very specific): | | | |
| | | | |
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| | | | |
| | | | |
| 20. Start Date of Visit: | 21. End Date of Visit: | | |
| | | | |
| | | | |
| 22. Authorized SES Manager - | | | |
| Signature: | | Date: | |
| 23. Security Office Approval - Signature: | | Date: | |
| oignaturo. | | Date. | |

INSTRUCTIONS FOR PREPARING Foreign National Data Card for Unclassified Foreign Visits and Assignments to WAPA (WAPA F 3000-72#- 6-03)

| Routing of Form: 1. Requestor- Meeting host initiates the form at least 30-45 days before planned visit 2. Regional Manager (or Acting Official) for approval signature 3. Original to Regional Safety and Security Office (The Safety and Security office reviews and sends to Pam Moody- CSO) 4. Pam Moody (CSO- A7700) (Conducts required back-ground checks and approves visit) 5. Approval sent to Regional Safety and Security Officer 6. Regional Safety and Security Officer notifies host and front desk personnel of approval/denial To allow time for background checks, this form must be completed at least 30 days for non- | | |
|--|---|--|
| sensitive countries visitors, and 45 days for visitors from sensitive countries. For more information and a list of sensitive countries go to: http://www.cso.wapa.gov/cpo/3700/SECURITY/fva.htm | | |
| | (Failure to complete this approval process may result in denial of visit.) | |
| Section A - PERSONAL DATA INFORMATION | | |
| BLOCK 1. BLOCK 2. BLOCK 3. BLOCK 5. BLOCK 6. BLOCK 7. BLOCK 8. BLOCK 9. BLOCK 10. BLOCK 11. | , | |
| | Section B - EMPLOYMENT DATA | |
| BLOCK 12. BLOCK 13. BLOCK 14. | | |
| | Section C - VISIT DATA INFORMATION | |
| BLOCK 15. BLOCK 16. BLOCK 17. BLOCK 18. BLOCK 20. BLOCK 21. BLOCK 22. BLOCK 23. | Buildings/Sites to be Visited: Be specific (note: Must be escorted by host at all times) Request Date: Date host is submitting this request for approval Name and Signature of DOE Host: Must be a supervisor Purpose of Visit: State clear purpose Technological Area: Be very specific- DO NOT abbreviate Start Date of Visit: Month/Day/Year End Date of Visit: Month/Day/Year Authorized SES Manager Signature: Regional Manager or SES. Authorized Approval Signature Pam Moody —visit not approved without this signature | |